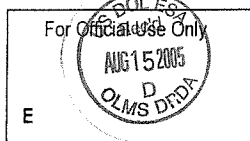


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8303	2. Fiscal Year Covered From: 1/1/04 Through: 12/31/04
3. Name and address of person filing. Name Frank C Lauria P.O. Box, Bldg., Room No., if any SUITE 70 Street 325 PAUL AVE City Ferguson State MO. ZIP Code + 4 63135	4. Name, file number, and address of labor organization. Name B.A.C Local #18 Labor Organization File Number 027-533 P.O. Box, Building and Room Number, if any SUITE 70 Street 325 PAUL AVE City FERGUSON State MO ZIP Code + 4 63135
5. Position in labor organization. Sargent of Arms	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any N/A Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. N/A 7.b. Amount. 0

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Frank C Lauria</u>	On <u>7-13-05</u> <u>636 290 6887</u> Date Telephone Number

Name of Person Filing Frank C Lauria	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name Tile Finishers Local #18 Mo. St. Louis, Mo Pension Plan Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 2732 Irondale</p> <p>City St. Louis, Mo</p> <p>State Mo ZIP Code + 4 63129</p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street N/A</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing. Pension Fund</p> <p>11.b. Approximate dollar value of such dealing. 5,113,496.00</p> <p>12.a. Nature of interest held or income received. Pension Fund Meeting at Lombard March 2004</p> <p>12.b. Amount. \$ 44.77</p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any: N/A</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p> <p>N/A</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment. 0</p>

Name of Person Filing Frank C Laurig	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name Tile Finishers Local #18 St. Louis</p> <p>Mo. Pension Plan</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street N/A</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>Pension Fund</p>
	<p>11.b. Approximate dollar value of such dealing. 5113,490.00</p>
	<p>12.a. Nature of interest held or income received.</p> <p>Pension Fund Meeting at Lombardo's</p> <p>June 2004</p>
	<p>12.b. Amount. \$50.41</p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street N/A</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p> <p>N/A</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p> <p>0</p>

Name of Person Filing Frank C Lauria	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name Tile Finishers Local #18 St. Louis Mo. Pension Plan Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 2732 Iron dale City St. Louis, Mo. State Mo. ZIP Code + 4 63129	9. Business deals with: <input checked="" type="checkbox"/> a. Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State N/A ZIP Code + 4	11.a. Nature of such dealing. <div style="text-align: center; font-size: 1.2em;">Pension Fund</div>
	11.b. Approximate dollar value of such dealing. \$113,486
	12.a. Nature of interest held or income received. <div style="text-align: center; font-size: 1.2em;">Pension Fund Meeting at Lombardo's</div> <div style="text-align: center; font-size: 1.2em;">October 2004</div>
	12.b. Amount. \$ 34.43

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment. <div style="text-align: center; font-size: 1.5em;">N/A</div>
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. 0

Name of Person Filing Frank C Lauria	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name Tile Finishers Local #18 St Louis</p> <p>Mo. Pension Plan</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 2732 Irondale</p> <p>City St. Louis</p> <p>State Mo. ZIP Code + 4 63129</p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State N/A ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p style="text-align: center;">Pension Fund Meeting at Lombardo's December 2004</p> <p>11.b. Approximate dollar value of such dealing. \$ 5,113,496</p> <p>12.a. Nature of interest held or income received.</p> <p style="text-align: center;">Pension Fund Meeting at Lombardo's Dec. 2004</p> <p>12.b. Amount. \$ 42.39</p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13 a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State</p> <p style="text-align: center;">N/A</p> <p>ZIP Code + 4</p>	<p>14.a. Nature of payment.</p> <p style="text-align: center;">N/A</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p> <p style="text-align: center;">10-</p>